

FEB/27/2012/MON 11:12 AM SH HEALTH RECORDS

FAX No. 570-321-2138

P. 020/025

19815-054

FURNARI, CHRISTOPHER A Enc# 6045821516 IPT MED 2/24/2012 RA0101 eRadiology PORTABLE CHEST 1 VIEW -Acc 2/24/2012 lpg

RADIOLOGY RESULT DOCUMENT
Susquehanna Health System
Williamsport Hospital

PATIENT NAME: FURNARI, CHRISTOPHER RMS ORDER NUMBER: 90001
MEDICAL RECORD# 224129 ORDERED FOR DATE: Feb 24 2012

THIS DOCUMENT HAS BEEN ELECTRONICALLY VERIFIED
Print Time: 02/24/2012 1:05 PM
Page 1 of 6

(5408837)(SADRES) PORTABLE CHEST 1 VIEW SEPARATE RESULT? ()
ACCOUNT # 5036792688 FINANCIAL CLASS: N ORD NURSE STATION: EMR
ADMISSION DATE: 02/24/2012 INPATIENT ROOM: 6E-69701 PATIENT CLASS: I
PT VISIT # 6045821516 DATE OF BIRTH: 04/30/1924 PATIENT PHONE: (570) 547-7950
PATIENT AGE: 87Y PATIENT SEX: M PT ADDRESS PO BOX 2500
ORDERING PHYSICIAN: THOMAS PATRICK FIERO WHITE DEER, PA 17887
COPIES TO: THOMAS PATRICK FIERO

Chest Internal Pain -

Final Report

ASI BEGIN:
ACCESSION: (5408837)
EXAM: IWRD 2243 PORTABLE CHEST 1 VIEW -Accession #: 5408837
DATE & TIME EXAM COMPLETED: Feb 24 2012 9:52AM
REASON FOR EXAM: Chest Internal Pain
HISTORY: Chest Internal pain per request. The patient relates left-sided anterior chest pain.

COMPARISON: 10/21/2010

INTERPRETATION: Portable Single-View Chest: Portable AP semi-erect examination obtained in the ED at 09400 hours reveals mild, ill-defined pulmonary parenchymal opacity or probable pneumonia within the left lung base superimposed upon a background of COPD. Parenchymal and pleural scarring is present in the upper right lung zone where previously had been moderate pneumonia. The heart is not enlarged. Mild aortic dilatation and uncoiling with calcific plaques is present. What are felt to be faint nipple shadows project in both mid lung zones.

IMPRESSION: Portable chest examination reveals what is felt to be mild left lung base pneumonia as described.

READ BY: ROBERT O FRANCE, M.D.

*****Results Electronically Verified*****

Transcribed by: JPP Transcribed Date: Feb 24 2012 1:09P

READING DOCTOR: (123759)
READING DATE: ()
TRANSCRIBED BY: ()
SPECIAL CASE: ()
TEACHING CASE: ()
CPT MODIFIER(S): ()
RELEASE RESULT: (Y)

F.C.I. Allenwood
P.O. Box 1000
3/4/12
M. P. Allenwood, D.O.
F.C.I. Allenwood
3/4/12

**Bureau of Prisons
Health Services
Cosign/Review**

Inmate Name:	FURNARI, CHRISTOPHER	Sex:	M	Reg #:	19815-054
Date of Birth:	04/30/1924			Race:	WHITE
Scanned Date:	03/12/2012 11:52			Facility:	ALM

Reviewed by Santos, Elizabete D.O., Clinical Director on 03/13/2012 08:33.

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FAX No. 570-321-2138

P. 016/025

1985-054

FURNARI, CHRISTOPHER A Enc# 6045821516 IPT MED 2/24/2012 LB0100 eLaboratory Results Final Report 2/25/2012 lpg

Susquehanna Health System

WILLIAMSPORT HOSPITAL
 777 RURAL AVENUE
 WILLIAMSPORT, PA 17701

570 321 2300

Doctor: BURKE, THOMAS

FURNARI, CHRISTOPHER

Patient MRN: 224129

Orgz:

Visit ID: 9036792688

Location:

Visit ext ID : 6045821516

Sex: M

Patient Phone: 570-547-7950

Birth Date: 04/30/1924

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CHEMISTRY

Test Name	Reference Range	Units of Measure	02/24/2012 11:20	02/24/2012 09:35	PF
NA	135-145	mmol/L		140	W 1
K	3.5-5.1	mmol/L		4.1	W 1
CL	99-109	mmol/L		107	W 1
CO2	20.0-31.0	mmol/L		28.3	W 1
Anion Gap	7-15	mmol/L		9	W 1
BUN	9-23	mg/dL		26	H W 1
CREAT	0.7-1.3	mg/dL		1.35	H W 1
				=1=	
GFR Estimated	> 60	mL/min		49.90	L W 1
GLUC	74-100	mg/dL		95	W 1
CALCIUM	8.7-10.4	mg/dL		9.3	W 1
MAG	1.3-2.7	mg/dL	2.1		W 1
CKMB	0.2-5.0	ng/mL	1.7		W 1
TROPONIN I	< 0.04	ng/mL	< 0.01	0.010	W 1
			=2=	=2=	
CK	32-294	U/L	62		W 1
LDL-DIRECT		mg/dL	33		W 1
			=3=		

M. P. Allenwood, PA-C
 FCC Allenwood
 3/8/12

Comments

=1= Adult normal Est. GFR values are >60. Estimated GFR is not accurate and not calculated on adolescents and children. Normal values and the calculation of an estimated GFR are based on National Kidney Disease Education Program. <http://www.nkdep.nih.gov>

Final Report**FURNARI, CHRISTOPHER**

Report as of 02/25/2012 02:01

F.C.I. Allenwood
 P.O. Box 2500
 White Deer, PA 17887

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FEB/27/2012/MON 11:11 AM SH HEALTH RECORDS

FAX No. 570-321-2138

P. 017/025

19815-054

FURNARI, CHRISTOPHER A Enc# 6045821516 IPT MED 2/24/2012 LB0100 eLaboratory Results Final Report 2/25/2012 1pg

Susquehanna Health System

1
WILLIAMSPORT HOSPITAL
 777 RURAL AVENUE
 WILLIAMSPORT, PA 17701

FURNARI, CHRISTOPHER

Patient MRN: 224129

Orgz:

Visit ID: 9036792688

Location:

Visit ext ID : 6045821516

Sex: M

Patient Phone: 570-547-7950

Birth Date: 04/30/1924

Copy To: DIS

570 321 2300

Doctor: BURKE, THOMAS

COPY

=2= A cutoff of 0.78 ng/mL is recommended for diagnosis of acute myocardial infarct. Levels between 0.04 ng/mL and 0.78 ng/mL are borderline for clinical acute myocardial infarct but do correlate with myocardial injury.
 =3= LDL-DIRECT:

<100 mg/dL DESIRABLE
 100-129 mg/dL NEAR TO ABOVE DESIRABLE
 130-159 mg/dL BORDERLINE HIGH
 160-189 mg/dL HIGH
 >190 mg/dL VERY HIGH

Test Name	Reference Range	Units of Measure	02/24/2012	PF
BNP	2-100	pg/mL	09:35 74	W 1

=1=

Comments

=1= >100 - SUGGESTS CONGESTIVE HEART FAILURE

M. P. Wanda, PA-C
 FCC Allenwood
 3/8/12

Final Report**FURNARI, CHRISTOPHER**

Report as of 02/25/2012 02:01

F.C.I. Allenwood
 P.O. Box 2500
 White Deer, PA 17887

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FEB/27/2012/MON 11:12 AM SH HEALTH RECORDS

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19815-054

FURNARI, CHRISTOPHER A Enc# 6045821516 IPT MED 2/24/2012 LB0100 eLaboratory Results Final Report 2/25/2012 1pg

Susquehanna Health System

WILLIAMSPORT HOSPITAL
777 RURAL AVENUE
WILLIAMSPORT, PA 17701

FURNARI, CHRISTOPHER

Patient MRN: 224129

Orgz:

Visit ID: 9036792688

Location:

Visit ext ID : 6045821516

Sex: M

Patient Phone: 570-547-7950

Birth Date: 04/30/1924

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570 321 2300

Doctor: BURKE, THOMAS

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HEMATOLOGY

Test Name	Reference Range	Units of Measure	02/24/2012 09:35		PF
WBC	4.0-11.0	THOU	8.0		W
RBC	4.2-5.4	MIL	4.35		W
HGB	13.0-17.0	G/DL	13.2		W
HCT	42.0-52.0	%	40.2	L	W
MCV	81-96	CUMIC	92.5		W
MCH	26-33	pg	30.4		W
MCHC	32-36	CUMIC	32.8		W
RDW	11.0-15.0	%	13.9		W
PLT	160-375	THOU	217		W
NE%	45-75	%	79.5	H	W
LY%	20-45	%	13.5	L	W
MO%	0-15	%	6.2		W
EO%	0.7-5.2	%	0.4	L	W
BA%	0.0-1.5	%	0.4		W
NE#	1.7-6.7	#	6.3		W
LY#	1.1-3.3	#	1.1		W
MO#	0.1-1.6	#	0.5		W
EO#	0.0-0.5	#	0.0		W
BA#	0.0-0.3	#	0.0		W
NRBC%	0	%	0.0		W

Final Report**FURNARI, CHRISTOPHER**

Report as of 02/25/2012 02:01

M. P. Allenwood, PA-C
 FCO Allenwood
 3/5/12

F.C.I. Allenwood
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FEB/27/2012/MON 11:12 AM SH HEALTH RECORDS

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P. 019/025

FURNARI, CHRISTOPHER A Enc# 6045821516 IPT MED 2/24/2012 LB0100 eLaboratory Results Final Report 2/25/2012 1pg

19815-054

Susquehanna Health System

1
WILLIAMSPORT HOSPITAL
 777 RURAL AVENUE
 WILLIAMSPORT, PA 17701

FURNARI, CHRISTOPHER

Patient MRN: 224129
 Visit ID: 9036792688
 Visit ext ID : 6045821516
 Orgz:
 Location:
 Sex: M

Patient Phone: 570-547-7950
 Birth Date: 04/30/1924
 Copy To: DIS

570 321 2300

Doctor: BURKE, THOMAS

COPY

NRBC#	0	#	0.0	1
				W
				1
Test Name	Reference Range	Units of Measure	02/24/2012 09:35	
PT	8.9-11.9	SECONDS	11.5	PF
				W
				1
INR	0.7-1.18		=1=	
			1.1	W
APTT	22-34	SECONDS	25	1
				W
			=2=	1

Comments

=1= New normal range

=2= AN IN-VITRO HEPARIN RESPONSE CURVE PERFORMED IN OUR LABORATORY INDICATES THAT A RANGE OF 50-90 SECONDS CORRESPONDS TO A RANGE EQUIVALENT TO 0.2-0.4 IU HEPARIN/ML.

KEY:

H:High

L:Low

Testing Performed at:

W1: WILLIAMSPORT HOSPITAL 777 RURAL AVENUE WILLIAMSPORT, PA 17701
 DONALD LEATHERS, DIRECTOR CLINICAL LAB, MD

M. P. Allenwood, PA-C
 F.C.I. Allenwood
 02/25/12

Final Report**FURNARI, CHRISTOPHER**

Report as of 02/25/2012 02:01

F.C.I. Allenwood
 P.O. Box 2500
 White Deer, PA 17887

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**Bureau of Prisons
Health Services
Cosign/Review**

Inmate Name: FURNARI, CHRISTOPHER
Date of Birth: 04/30/1924
Scanned Date: 03/12/2012 11:50

Sex: M

Reg #: 19815-054
Race: WHITE
Facility: ALM

Reviewed by Santos, Elizabete D.O., Clinical Director on 03/13/2012 08:33.

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FEB/27/2012/MON 11:10 AM SH HEALTH RECORDS

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P. 012/025

19815-054

FURNARI, CHRISTOPHER A Enc# 6045821516 IPT MED 2/24/2012 CN0200 eTWH Consult Cosign 2/24/2012 lpg

Susquehanna Health**Williamsport Hospital
HEALTH RECORDS**

Name:	FURNARI, CHRISTOPHER A
M.R.#	224129
Date of Birth:	04/30/1924
Dictating Physician:	Scott C Rosenbaum, PA-C
Attending Physician:	Joseph P. Bering, M.D.
Room:	6E 697 01
Admit Date:	02/24/2012
Discharge Date:	
Encounter #:	6045821516

CONSULTATION REPORT

COPY

Date: 02/24/2012 Ordering Physician: Thomas V. Burke, M.D.

Scott Rosenbaum, PA-C dictating for Joseph P. Bering, MD.

ATTENDING PHYSICIAN: Thomas V. Burke, MD

CHIEF COMPLAINT: Chest pain.

HISTORY OF PRESENT ILLNESS: This is an 87-year-old male with known CAD with history of PTCA and stent placement in the proximal to mid LAD in September of 2006 who also has issues with hypertension, COPD, and multiple episodes of pneumonia who reported here from the Lewisburg Federal Penitentiary due to chest pain. The patient reports that around 11 o'clock last night he developed chest pain. This lasted and was pretty much unrelenting for 5 hours. He had no other symptoms associated with his chest pain. This chest pain was on the left side of his chest and did not radiate anywhere. He denies having any problems with excessive fatigue, palpitations, shortness of breath, dyspnea on exertion, orthopnea, PND, wheezing, abdominal pain, heartburn, indigestion, nausea or vomiting, lower extremity edema, dizziness, lightheadedness, or syncope. The patient has also been having a cough for approximately 2 months.

The patient took 5 nitroglycerin of his own without relief of his chest pain. Apparently, the patient went to the infirmary at the prison and was given 2 more nitroglycerin and did notice some relief. By the time the patient arrived in our emergency department, he did not have pain. He reports that there was nothing that exacerbated or alleviated his pain. This did come on while he was lying down. The patient says that his pain was 10/10 at that time.

PAST MEDICAL HISTORY: CAD, anterior apical wall MI, hyperlipidemia, hypertension, COPD, BPH, DJD, GERD, and history of positive PPD.

PAST SURGICAL HISTORY: PTCA and stent placement in September of 2006.

FAMILY HISTORY: Noncontributory.

SOCIAL HISTORY: The patient is incarcerated at the Lewisburg Federal Penitentiary. He is a former heavy smoker but has stopped. He does not

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P.O. Box 2500
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M. Rosenbaum, PA-C
FCI, Allenwood
3/8/12

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FURNARI, CHRISTOPHER A Rnc# 6045821516 IPT MED 2/24/2012 CN0200 eTWH Consult Coalign 2/24/2012 1pg

19815-054

Susquehanna Health**Williamsport Hospital
HEALTH RECORDS**

Name:	FURNARI, CHRISTOPHER A
M.R.#	224129
Date of Birth:	04/30/1924
Dictating Physician:	Scott C Rosenbaum, PA-C
Attending Physician:	Joseph P. Bering, M.D.
Room:	6E 697 01
Admit Date:	02/24/2012
Discharge Date:	
Encounter #:	6045821516

use alcohol or illegal drugs.

CURRENT MEDICATIONS: In the hospital:

1. Albuterol HFA 180 mcg 4 times a day.
2. Albuterol/ipratropium 2 puffs 4 times a day.
3. Colace 100 mg twice a day.
4. Doxazosin 4 mg at bedtime.
5. Famotidine 20 mg twice a day.
6. Finasteride 5 mg daily.
7. Fondaparinux 2.5 mg subcutaneously every 24 hours.
8. Isosorbide mononitrate 30 mg twice a day.
9. Lisinopril 20 mg daily.
10. Metoprolol tartrate 25 mg twice a day.
11. Mometasone 220 mcg 440 mcg inhaled each evening.
12. Simvastatin 40 mg at bedtime.

COPY

ALLERGIES: No known diagnosed allergies.

REVIEW OF SYSTEMS: A complete 10-point review of systems was performed on this patient. Please see the HPI for all pertinent positive and negative review of systems.

PHYSICAL EXAMINATION: GENERAL: This is an elderly white male in no apparent distress. He appears well nourished and well developed. **VITAL SIGNS:** Temperature 36.9, pulse 65, respiratory rate 22, O2 saturation 100% on 2L, blood pressure 154/74. **HEENT:** NCAT. EOML. Sclerae are anicteric. Oral mucosa was moist. Throat was benign. **NECK:** Supple without thyromegaly or bruits. Carotid pulses were equal bilaterally at 2+. **HEART:** Regular rate and rhythm without murmur, rub, or gallop. S1 and S2 appeared to be normal. No lifts, heaves, or thrills were noted. **LUNGS:** With bilateral expiratory wheezes. These were scattered throughout all lung fields. No consolidation was noted. **ABDOMEN:** Soft and nontender without rebound, guarding, or organomegaly. No bruits were noted. **EXTREMITIES:** Peripheral pulses were mildly diminished in the lower extremities at 1+. The upper extremities appeared to be normal at 2+. There was no peripheral edema. **SKIN:** Warm and dry without significant rashes or lesions.

EKG: Sinus rhythm with a rate of 70 beats per minute, first-degree AV block, probable left atrial abnormality, borderline R-wave progression in the anterior leads.

LABORATORIES: The patient has had cardiac enzymes drawn since his admission. His troponin is less than 0.01 with a CK of 62 and CK-MB of 1.7. The patient's renal function is somewhat diminished from previous

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F.C.I. Allenwood
P.O. Box 2500
White Deer, PA 17887

MP. no 3
3/8/12

FEB/27/2012/MON 11:10 AM SH HEALTH RECORDS

FAX No. 570-321-2138

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FURNARI, CHRISTOPHER A Enc# 6045821516 IPT MED 2/24/2012 CN0200 eTWH Consult Coalign 2/24/2012 1pg

19815-054

Susquehanna Health**Williamsport Hospital
HEALTH RECORDS**

Name:	FURNARI, CHRISTOPHER A
M.R.#	224129
Date of Birth:	04/30/1924
Dictating Physician:	Scott C Rosenbaum, PA-C
Attending Physician:	Joseph P. Bering, M.D.
Room:	6E 697 01
Admit Date:	02/24/2012
Discharge Date:	
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P.O. Box 2500
White Deer, PA 17887

MD
3/8/12

FEB/27/2012/MON 11:11 AM SH HEALTH RECORDS

FAX No. 570-321-2138

P. 014/025

FURNARI, CHRISTOPHER A ENC# 6045821516 IPT MBD 2/24/2012 CN0200 eTWA Consult Cosign 2/24/2012 lpg

19815-054

Susquehanna Health**Williamsport Hospital
HEALTH RECORDS**

Name:	FURNARI, CHRISTOPHER A
M.R.#	224129
Date of Birth:	04/30/1924
Dictating Physician:	Scott C Rosenbaum, PA-C
Attending Physician:	Joseph P. Bering, M.D.
Room:	6E 697 01
Admit Date:	02/24/2012
Discharge Date:	
Encounter #:	6045821516

COPY

admissions. His BUN is 26 with creatinine of 1.35 and GFR estimated at 49.90.

ASSESSMENT:

1. Chest pain that is not cardiac in nature. The patient had 5 hours of unrelenting chest pain without EKG changes or cardiac enzymes elevations. The patient is currently pain free. This is not an indication of acute coronary syndrome (ACS) or ischemia.
2. Coronary artery disease (CAD) with history of percutaneous transluminal coronary angioplasty (PTCA) and stents of the proximal to mid left anterior descending (LAD) on September 6, 2006. A repeat catheterization was done on March 14, 2007, and was within normal limits.
3. Chronic obstructive pulmonary disease (COPD), which appears to be stable at this time. The patient has had a cough for approximately 2 months.
4. History of multiple admissions for pneumonia in the past with an episode of methicillin-resistant Staphylococcus aureus (MRSA) sepsis with pneumonia.
5. Hypertension, which is not optimally controlled at this time.

RECOMMENDATIONS: The patient was seen and discussed with Dr Bering today. With the length of time that the patient was having chest pain and no EKG changes or cardiac enzymes elevations, this is not acute coronary syndrome or ischemia. I would not recommend any further cardiac testing on this patient. At this point, we would recommend optimally controlling the patient's hypertension as well as his other medical problems.

Thank you for allowing us to participate in this patient's care.

Scott C Rosenbaum, PA-C

Joseph P. Bering, M.D.

SCR/opt

Dictating Physician: 301316/Other Physician: 208009

Dictated Date: 02/24/2012 1:35 P 000026390

Transcribed Date: 02/25/2012 1:51 P 1047947

cc: Thomas V. Burke, M.D.

ECI Allenwood
ECI Bering
White Plains, NY 10627

MA. 2012
F. 2012
3/8/12

FEB/27/2012/MON 11:11 AM SH HEALTH RECORDS

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FURNARI, CHRISTOPHER A Enc# 6045821516 IPT MED 2/24/2012 CN0200 eTWH Consult Cosign 2/24/2012 lpg

1985-054

Susquehanna Health**Williamsport Hospital
HEALTH RECORDS**

Name:	FURNARI, CHRISTOPHER A
M.R.#	224129
Date of Birth:	04/30/1924
Dictating Physician:	Scott C Rosenbaum, PA-C
Attending Physician:	Joseph P. Bering, M.D.
Room:	6E 697 01
Admit Date:	02/24/2012
Discharge Date:	
Encounter #:	6045821516

Scott C Rosenbaum, PA-C

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Signed by ROSENBAUM, SCOTT C P.A. on 27-Feb-2012 08:40:40 -05:00

F.C.I. Allenwood
P.O. Box 2500
White Deer, PA 17887FURNARI, CHRISTOPHER A PA-C
FURNARI, CHRISTOPHER A
3/6/12

**Bureau of Prisons
Health Services
Cosign/Review**

Inmate Name: FURNARI, CHRISTOPHER
Date of Birth: 04/30/1924
Scanned Date: 03/12/2012 11:49

Sex: M

Reg #: 19815-054
Race: WHITE
Facility: ALM

Reviewed by Santos, Elizabete D.O., Clinical Director on 03/13/2012 08:34.

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FEB/27/2012/MON 11:09 AM SH HEALTH RECORDS

FAX No. 570-321-2138

P. 009/025

FURNARI, CHRISTOPHER A Enc# 6045821516 IPT MED 2/24/2012 BP0106 eTWH History and Physical 2/24/2012 lpg

Susquehanna Health**Williamsport Hospital
HEALTH RECORDS**

Name:	FURNARI, CHRISTOPHER A
M.R.#	224129
Date of Birth:	04/30/1924
Dictating Physician:	Thomas V. Burke, M.D.
Attending Physician:	Thomas V. Burke, M.D.
Room:	6E 697.01
Admit Date:	02/24/2012
Discharge Date:	
Encounter #:	6045821516

COPY

HISTORY AND PHYSICAL EXAMINATION

This 87-year-old man is admitted with chest pain.

HISTORY OF PRESENT ILLNESS: The patient has a history of coronary artery disease. In 2006 he had an acute anterior wall myocardial infarction for which he underwent angioplasty and stent placement in the left anterior descending. He was re-admitted in 2007 at which time he again had chest pain with cardiac catheterization which showed the stents were opened with no significant obstructive coronary disease. A subsequent admission in 2008 was for a left lower lobe pneumonia successfully treated. Another admission in August 2010 was also for pneumonia which resolved with antibiotic therapy. Video bronchoscopy was performed at that time and he did have MRSA sepsis with the pneumonia. He has done well since that admission until the evening before this admission when he experienced the onset of precordial sharp pain which occurred before he went to bed. He was able to doze off and on during the night. He had taken a total of five nitroglycerin over night with only marginal improvement in the pain. He then went to the prison infirmary where he received two additional nitroglycerin with good pain relief. By the time he arrived in the emergency room he was pain free. He did not feel short of breath. He was not diaphoretic. He did not have nausea or vomiting. He did not feel dizzy or lightheaded. He has chronic venous insufficiency for which he wears support stockings. He has not been having chest pains and has not required nitroglycerin before the current episode.

PAST MEDICAL HISTORY: His past medical history is significant for coronary artery disease as noted. He has prostatic hypertrophy, hypertension and COPD. He has had the previous pneumonias and methicillin-resistant staph aureus sepsis also as noted above. He has COPD. He is known to be PPD positive but has never had chemotherapy for TB.

SOCIAL HISTORY: He is incarcerated in federal prison. He had been a heavy cigarette smoker until 18 years ago when he quit.

FAMILY HISTORY: Family history is noncontributory.

REVIEW OF SYSTEMS: Review of systems is negative for recent significant weight change. He has not been having fevers or chills. Cardiovascular as

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PA-C
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P. 010/025

FURNARI, CHRISTOPHER A Enc# 6045821516 IPT MED 2/24/2012 H02106 eTWH History and Physical 2/24/2012 1pg

19815-054

Susquehanna Health**Williamsport Hospital
HEALTH RECORDS**

Name:	FURNARI, CHRISTOPHER A
M.R.#	224129
Date of Birth:	04/30/1924
Dictating Physician:	Thomas V. Burke, M.D.
Attending Physician:	Thomas V. Burke, M.D.
Room:	6E 697 01
Admit Date:	02/24/2012
Discharge Date:	
Encounter #:	6045821516

in the HPI. Respiratory: He does have a cough productive of scant amounts of white sputum. He has not been increasingly short of breath. Gastrointestinal: Negative for reflux. He has no history of ulcers. No significant bowel problems. Genitourinary: Negative for renal stones or kidney infections. He does have prostatic hypertrophy but is able to pass urine without difficulty.

COPY

Endocrine: He is not diabetic. He has no thyroid history. Musculoskeletal: Negative for significant arthritis. Neurologic: He has no history of stroke or seizure seen. He has no history of anemia or easy bleeding or bruising. Psychiatric: Negative for anxiety or depression. Skin: Negative for rash. The remainder of review of systems is negative.

PHYSICAL EXAMINATION: General: On exam he is a well-developed, well-nourished man who is lying comfortably semirecumbent in bed. He is awake, alert and oriented.

Vital signs: Temperature is 36.6. Heart rate 72 and regular, respiratory rate 20, blood pressure is 140/70, hemoglobin saturation on oxygen at 2 liters per minute is 95%

HEENT: Head is normocephalic. Eyes: Extraocular muscles are intact. Conjunctiva is clear. Nose is straight. Pharynx is without erythema or exudate. Oral mucosa is moist and intact. Tongue is not enlarged.

Neck: He is without JVD. Trachea is midline. Cervical and supraclavicular adenopathy is negative. There is no thyromegaly.

Lungs: Lungs are resonant to percussion with somewhat diminished breath sounds bilaterally but are clear to auscultation.

Heart: Heart is regular. There are no gallops, murmurs or rubs. First and second heart sounds are normal.

Abdomen: Abdomen is quiet and soft. There are no masses, no organomegaly.

Extremities: Extremities are without clubbing, cyanosis or edema. There is no joint swelling or tenderness.

Neurologic: There are no focal deficits.

LABORATORY DATA: Chest radiograph shows scarring in the right upper lobe and perhaps in the left lower lobe as well but is improved from chest radiograph in 2010. EKG does not have acute changes and is not

DRP
3/8/12
PAC
Wood

FEB/27/2012/MON 11:10 AM SH HEALTH RECORDS

FAX No. 570-321-2138

P. 011/025

14815-054

FURNARI, CHRISTOPHER A Enc# 6045821516 IPT MED 2/24/2012 RP0106 cTWH History and Physical 2/24/2012 1pg

Susquehanna Health**Williamsport Hospital
HEALTH RECORDS**

Name:	FURNARI, CHRISTOPHER A
M.R.#	224129
Date of Birth:	04/30/1924
Dictating Physician:	Thomas V. Burke, M.D.
Attending Physician:	Thomas V. Burke, M.D.
Room:	6E 697 01
Admit Date:	02/24/2012
Discharge Date:	
Encounter #:	6045821516

significantly different from a cardiogram of June 2011, blood urea nitrogen is 26, creatinine 1.4, calcium 9.3 troponin 0.01, hemoglobin 13.2, white count 8.0, platelets 217,000.

ASSESSMENT:

1. Chest pain perhaps acute coronary syndrome.
2. History of coronary artery disease.
3. Chronic obstructive pulmonary disease.
4. Prostatic hypertrophy.
5. History of positive PPD.

COPY

PLAN: Will repeat cardiac enzymes, monitor, consult cardiology, treat with nitrates as needed.

Thomas V. Burke, M.D.

TVB/scf

Dictating Physician: 201004/Other Physician:

Dictated Date: 02/24/2012 10:34 A 000026118

Transcribed Date: 02/24/2012 11:06 A 1047778

cc: Thomas V. Burke, M.D.

F.C.I. Allenwood
P.O. Box 2500
White Bear, PA 17987

[Signature]
2/28/12

**Bureau of Prisons
Health Services
Cosign/Review**

Inmate Name: FURNARI, CHRISTOPHER
Date of Birth: 04/30/1924
Scanned Date: 03/12/2012 11:48

Sex: M

Reg #: 19815-054
Race: WHITE
Facility: ALM

Reviewed by Santos, Elizabete D.O., Clinical Director on 03/13/2012 08:34.

COPY

MAR/01/2012/THU 10:33 AM SH HEALTH RECORDS

FAX No. 570-321-2138

P. 012/055

19815 054

FURNARI, CHRISTOPHER A Enc# 6045821516 IPT MED 2/24/2012 DS0100 eTWH Discharge Summary 2/24/2012 1pg

Susquehanna Health**Williamsport Hospital
HEALTH RECORDS**

Name:	FURNARI, CHRISTOPHER A
M.R.#	224129
Date of Birth:	04/30/1924
Dictating Physician:	Thomas V. Burke, M.D.
Attending Physician:	Thomas V. Burke, M.D.
Room:	6E 697 01
Admit Date:	02/24/2012
Discharge Date:	02/24/2012
Encounter #:	6045821516

DISCHARGE SUMMARY**COPY**

REASON FOR ADMISSION: This 87-year-old man is admitted with chest pain.

For details of the admission, see the History and Physical dictated earlier today.

ADMITTING DIAGNOSES:

1. Chest pain, acute coronary syndrome.
2. Chronic obstructive pulmonary disease (COPD).
3. Renal insufficiency.
4. Hypertension.
5. Gastroesophageal (GE) reflux.

HOSPITAL COURSE: The patient was admitted to a monitored bed. Initial cardiac enzymes were negative. He was seen in consultation by Cardiology. The previous cardiac catheterization films were reviewed by Cardiology. It was felt that this did not represent angina or chest pain of coronary origin. The patient is being discharged back to the prison for followup at the prison infirmary. It is noted that his creatinine is mildly elevated at 1.35 with BUN of 26. These were 13 and 0.92 respectively in August of 2010. He is discharged in good condition.

DISCHARGE DIAGNOSES:

1. Chest pain of musculoskeletal origin.
2. Chronic obstructive pulmonary disease (COPD).
3. History of coronary artery disease.

M. Poy... PA-C
FCO...
3/8/12

MAR/01/2012/THU 10:33 AM SH HEALTH RECORDS

FAX No. 570-321-2138

P. 013/055

FURNARI, CHRISTOPHER A Enc# 6045821516 IPT MED 2/24/2012 DS0100 eTNA Discharge Summary 2/24/2012 1pg

Susquehanna Health**Williamsport Hospital
HEALTH RECORDS**

Name:	FURNARI, CHRISTOPHER A
M.R.#	224129
Date of Birth:	04/30/1924
Dictating Physician:	Thomas V. Burke, M.D.
Attending Physician:	Thomas V. Burke, M.D.
Room:	6E 697 01
Admit Date:	02/24/2012
Discharge Date:	02/24/2012
Encounter #:	6045821516

4. Gastroesophageal (GE) reflux.
5. Renal failure.
6. Prostatic hypertrophy.

DISCHARGE MEDICATIONS:

1. Albuterol MDI 2 puffs QID.
2. Combivent 2 puffs QID.
3. Colace 100 mg BID.
4. Cardura 4 mg at bedtime.
5. Ranitidine 150 mg BID.
6. Proscar 5 mg daily.
7. Indur 30 mg BID.
8. Prinivil 20 mg daily.
9. Lopressor 25 mg BID.
10. Simvastatin 40 mg at bedtime.
11. Fluticasone 2 puffs BID.

COPY

PA 11-08-2012
 5:00 PM
 11-08-2012

RECOMMENDATIONS: Repeat BMP in a week to follow the BUN and creatinine.

CC: *Lewisburg Federal Penitentiary

Page 2 of 3

M. P. P. da, PA-C
 F. C. Allenwood
 3/5/12

MAR/01/2012/THU 10:33 AM SH HEALTH RECORDS

FAX No. 570-321-2138

P. 014/055

FURNARI, CHRISTOPHER A Enc# 6045821516 IPT MED 2/24/2012 DS0100 etWE Discharge Summary 2/24/2012 lpg

Susquehanna Health**Williamsport Hospital
HEALTH RECORDS**

Name:	FURNARI, CHRISTOPHER A
M.R.#	224129
Date of Birth:	04/30/1924
Dictating Physician:	Thomas V. Burke, M.D.
Attending Physician:	Thomas V. Burke, M.D.
Room:	6E 697 01
Admit Date:	02/24/2012
Discharge Date:	02/24/2012
Encounter #:	6045821516

COPY

Thomas V. Burke, M.D.

TVB/opt

Dictating Physician: 201004/ Other Physician:

Dictated Date: 02/24/2012 2:35 P 000026507

Transcribed Date: 02/27/2012 11:02 A 1048067

cc: Thomas V. Burke, M.D.

D Copy

Signed by BURKE, THOMAS V. M.D. on 27-Feb-2012 14:11:38 -05:00

M. P. [Signature] PA-C
FC [Signature] Allenwood
3/8/12

**Bureau of Prisons
Health Services
Cosign/Review**

Inmate Name: FURNARI, CHRISTOPHER
Date of Birth: 04/30/1924
Scanned Date: 03/12/2012 11:43

Sex: M

Reg #: 19815-054
Race: WHITE
Facility: ALM

Reviewed by Santos, Elizabete D.O., Clinical Director on 03/13/2012 08:34.

COPY

03/02/12 02:49 PM CST Sfp via VSI-FAX

Page 1 of 2 8242433 0

U.S. MEDICAL CENTERS FOR FEDERAL PRISONERS
Laboratory, 1900 W. Sunshine
SPRINGFIELD, MISSOURI 65808
(417) 862-7041

*** SENSITIVE BUT UNCLASSIFIED ***
FINAL REPORT

Register Number : 19815-054
 Name : FURNARI, CHRISTOPHER
 Location : FCI ALLENWOOD MED (AIM)
 Admit. Physician: POWANDA PA
 Order. Physician: POWANDA PA
 Collected : 03/01/12 @ 10:30 by: RE

Age : 87 yr
 Sex : M
 Room :
 Accession Number : 9212

Test	Result	Flag	Reference Range/Units	Tech
BASIC METABOLIC				
Glucose	86		70 - 110 mg/dL	KE SP
Urea Nitrogen	26	HI	7 - 22 mg/dL	KE SP
Creatinine IDMS	1.20		0.66 - 1.25 mg/dL	KE SP
GFR	57			HS SP
GFR units measured as mL/min/1.73 m ²				
If African American, multiply by 1.210				
A calculated GFR < 60 suggests chronic kidney disease, if found over a 3 month period.				
SodiumI	143		137 - 148 mmol/L	KE SP
Potassium	4.6		3.5 - 5.0 mmol/L	KE SP
ChlorideI	107		98 - 114 mmol/L	KE SP
CalciumI	9.1		8.5 - 10.9 mg/dL	KE SP

FCI Allenwood
 P.O. Box 2500
 White Deer, PA 17887

M. Powanda, PA-C
 FCI Allenwood
 3/6/12

Legend

LO=Low AL=Alarm Low HI=High AH=Alarm High AB=Abnormal
 EL=Less than Clinically Reportable Range
 EH=Greater than Clinically Reportable Range

Name : FURNARI, CHRISTOPHER
 Register Number : 19815-054
 Printed : 03/02/2012 @ 14:30

Location : AIM
 Page : 1 of 1

**Bureau of Prisons
Health Services
Cosign/Review**

Inmate Name: FURNARI, CHRISTOPHER
Date of Birth: 04/30/1924
Scanned Date: 03/05/2012 12:39

Sex: M

Reg #: 19815-054
Race: WHITE
Facility: ALM

Reviewed by Santos, Elizabete D.O., Clinical Director on 03/05/2012 14:39.

COPY

00 15 11 011 #5265
Rev. 2/10/11

19815-054

Discharge

Date: _____ Time: _____

Discharged

to _____ Via _____

COPY

PATIENT CARE INSTRUCTIONS

- ☐ See pre-printed instructions
- ☐ See Discharge Instructions – Referral Form
- ☐ See Discharge Instruction – Nursing Care Plan
- ☒ Do not smoke tobacco (cigarettes, cigars, or pipes) or use smokeless tobacco (chew or snuff). Tobacco hurts your health. Even being near someone who smokes hurts your health. Tobacco hurts your lungs, heart, blood vessels, and brain. Tobacco keeps wounds from healing well.

If you smoke and would like to quit, we want to help you! Call: 1-800-264-1290 for more information.

EQUIPMENT / SUPPLIES**COMMUNITY RESOURCES****NUTRITION CARE INSTRUCTIONS**

RN Signature

Date _____ Time _____

Patient Signature: _____

Date _____ Time _____

PHYSICIAN SPECIAL CARE INSTRUCTIONS☐ See Discharge medication instructions.☐ See Pre-printed Physician Discharge Instructions**Bathing Allowed** ☐ No restrictions☐ Shower ☐ Tub Bath ☐ Sponge Bath**Activity Allowed** ☐ No Restrictions☐ Sitting ☐ Driving ☐ Stairs ☐ Exercise☐ Sexual Activity☐ Weight Bearing Status _____☐ Do Not Lift Over _____ pounds**May Return to Work** _____**Diet:** ☐ As Tolerated☐ _____**Other Instructions:**

Keep vaccine and medication records up to date

APPOINTMENTS / OUTPATIENT SERVICESIt is very important for you to make / keep the following appointment(s) with your doctor:

Keep any scheduled appointments

Physician Signature: _____

Date 2/24/12 Time _____

SUSQUEHANNA HEALTH
☐ Divine Providence Hospital ☐ Muncy Valley Hospital
☐ Williamsport Hospital
Discharge Instructions- Physician Plan of Care

Page 1 of 1



DS0111

 F.C.I. Allenwood
 P.O. Box 2500
 White Deer, PA 17887

 Furnari, Christophe 6045821516
 MR 224129 04/30/1924
 DOS 02/24/2012 Adm IP
 Burke, Thomas V, MD 87Y M

 M. Poyasda, PA-C
 FCI Allenwood
 2/27/12

00 15 11 010 #5266
Rev 6/08 barcode rev 3/09

19815-654

Allergies

List medication, dose, frequency and method of administration (if other than by mouth).

Keep personal immunization and medication records up to dateTime of
Last
Dose

Comments

Albuterol MDI 2 puffs qid
 Ambivent 2 puffs qid
 Celecox 100mg bid
 Lasix 1mg b.i.d.
 Noritidine 150mg bid
 Lasix 5mg daily
 Imdur 30mg bid
 Prilisinil 20mg daily
 Tylenol 150mg bid
 Unasyn 400mg b.i.d.
 Fluticasone 2 puffs bid

COPY

Repeat BMP next week to follow BUN/creatinine
 2/6/13

Physician

T. Re

Date 2/21/13

Discussed with patient the importance of maintaining a current list of medications

Personal Medication Record given

Medication education needs met

Instructions discussed with patient. Patient verbalizes understanding

Patient unable to sign or verbalize understanding. Reason

Form placed in sealed envelope and sent with Correctional Officer/Attendant

AFTER REVIEW AND DISCUSSION, PATIENT/SIGNIFICANT OTHER VERBALIZES UNDERSTANDING OF
 DISCHARGE INSTRUCTIONS AND RECEIVES A SIGNED COPY.

Signatures: Patient/Other

RN *Christine Michael*

M. P. Allenwood, PA-C
 F.C.I. Allenwood
 2/27/13

SUSQUEHANNA HEALTH

☐ Divine Providence Hospital ☐ Muncy Valley Hospital
☐ Williamsport Hospital

Discharge Instructions- MEDICATIONS

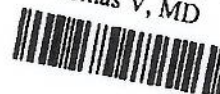
Page 1 of 1

F.C.I. Allenwood
 P.O. Box 2500
 White Deer, PA 17887

Furnari, Christophe 6045821516
 MR 224129 04/30/1924
 DOS 02/24/2012 Adm IP
 Burke, Thomas V, MD 87Y M



DS0111



19815-054

Discharge Medication Instructions

Pt. Name: Furnari, Christopher A

Nursing Unit: 6E

MR# 224129

DOB 04/30/1924

Attending Doctor

Burke Thomas V

Primary Care Doctor

Allenwood Dr

Allergies: No Known Drug Allergies

****Continue medications listed below - do not continue medications that are crossed off
Discard any medications at home that are not on this list

Current Medication	Dose	Route	Frequency	Next dose due	What drug is for or	Comments	New Med
ALBUTEROL HFA (VENTOLIN HFA)	180MCG	INHALATION	FOUR TIMES A DAY				
ALBUTEROL/IPRATROPIUM (COMBIVENT)	2PUFF	INHALATION	FOUR TIMES A DAY				
AMIODARONE 150 MG/100 ML (NEXTERONE 150 MG/100 ML)	100 ML	INTRAVENOUS	ONE TIME AS NEEDED FOR PERSISTENT V-TACH DESPITE LIDO				
ASPIRIN BABY	81MG	BY MOUTH	ONCE DAILY				
ATROPINE	0.5MG	INTRAVENOUS	AS NEEDED FOR HR<60, SYMPTOMATIC HYPOTENSION				
DEXTROSE 5% WATER (NON-DEHP) (DSW (NON-DEHP))	500 ML 600 MG	INTRAVENOUS	AS NEEDED FOR PERSISTENT V-TACH DESPITE LIDO				
AMIODARONE IV (CORDARONE IV)							
DOCUSATE NA (COLACE)	100MG	BY MOUTH	TWICE A DAY				
DOXAZOSIN* (CARDURA*)	4MG	BY MOUTH	AT BEDTIME				
FAMOTIDINE (PEPCID)	20MG	BY MOUTH	TWICE A DAY				
FINASTERIDE (PROSCAR)	5MG	BY MOUTH	ONCE DAILY				
FONDAPARINUX (ARIXTRA)	2.5MG	SUBCUTANEOUS	EVERY 24 HOURS				
ISOSORBIDE MONONITRATE (IMDUR)	30MG	BY MOUTH	TWICE A DAY				
LIDOCAINE 2% (LIDOCAINE 2% (ABBOJECT))	100MG	INTRAVENOUS	AS NEEDED FOR 20 BEATS OF SUST VT >=120				

RN: _____

Date: _____ Time: _____

Physician: _____

Date: _____ Time: _____

SUSQUEHANNA HEALTH

____ Divine Providence Hospital ____ Muncy Valley Hospital ____ The Williamsport Hospital

Discharge Medication Instructions

M. Powell, PA-C
FCC Allenwood
2/27/12

Print Date/Time:

2/24/2012

2:48 pm

F.C.I. Allenwood

P.O. Box 2500

White Deer, PA 17887

Page 1 of 3

697

19815-054

Discharge Medication Instructions

Pt. Name: Furnari, Christopher A

Nursing Unit: 6E

MR# 224129

DOB 04/30/1924

Attending Doctor

Burke Thomas V

Primary Care Doctor

Allenwood Dr

Allergies: No Known Drug Allergies

****Continue medications listed below - do not continue medications that are crossed off
Discard any medications at home that are not on this list

Current Medication	Dose	Route	Frequency	Next dose due	What drug is for or	Comments	New Med
LIDOCAINE/5% DXTROSE (LIDOCAINE 1 GM/D5W 250ML)	250 ML	INTRAVENOUS	AS NEEDED FOR 20 BEATS OF SUST VT ≥120				
LISINAPRIL* (PRINIVIL*)	20MG	BY MOUTH	ONCE DAILY				
METOPROLOL TARTRATE* (LOPRESSOR*)	25MG	BY MOUTH	TWICE A DAY				
MOMETASONE 220 MCG (ASMANEX 220 MCG)	440MCG	INHALATION	EVERY EVENING				
morphine (MORPHINE*)	2MG	INTRAVENOUS	AS NEEDED FOR CHEST PAIN				
SIMVASTATIN (ZOCOR)	40MG	BY MOUTH	AT BEDTIME				
SODIUM CHLORIDE 0.9% (FS) (NSS (FS))	500 ML	INTRAVENOUS	AS NEEDED FOR SBP < 100				
TITRATE DRIP	TITRATE	INTRAVENOUS	AS NEEDED FOR LIDOCAINE				
TITRATE DRIP	TITRATE	INTRAVENOUS	AS NEEDED FOR AMIODARONE				

RN: Christopher R

Date: _____ Time: _____

Physician: I have reconciled current patient medications with the home medication list

Date: _____ Time: _____

SUSQUEHANNA HEALTH

___ Divine Providence Hospital ___ Muncy Valley Hospital ___ The Williamsport Hospital

Discharge Medication Instructions

R.C.I. Allenwood
P.O. Box 2500
White Deer, PA 17887

M. P. Allenwood, PA-C
FCCP Allenwood
2/27/12

Print Date/Time:

2/24/2012 2:48 pm

19815054

Discharge Medication Instructions

Pt. Name: Furnari, Christopher A

Nursing Unit: 6E

MR#

224129

DOB 04/30/1924

Attending Doctor

Burke Thomas V

Primary Care Doctor

Allenwood Dr

Allergies: No Known Drug Allergies

Current Medication	Dose	Route	Frequency	Next dose due	What drug is for	Comments	New Med

Check All That Apply:

- ☐ Discussed with patient the importance of maintaining a current list of medications
☐ Discussed with patient the need to discard any medications at home that are no longer being continued
☐ Personal Medications Record given
☐ Medication Education needs met
☐ Instructions discussed with patient. Patient verbalized understanding
☐ Patient Unable to sign or verbalize understanding. Reason _____
☐ Form placed in a sealed envelope and sent with Correctional Officer/Attendant

Flu Vaccine Received On: _____

Pneumococcal Vaccine Received On: _____

Patient/Responsible Party Signature _____

Date/Time: _____

End Of Patient Report

- Place Original Document in permanent record _____
 Attach copy to discharge instruction or transfer/referral form _____
 Provide copy to primary care physician _____
 Attach a copy to phone call/follow-up paperwork _____

RN: _____

Date: _____

Time: _____

 I have reconciled current patient medications with the home medication list
 Physician: _____

Date: _____

Time: _____

SUSQUEHANNA HEALTH

_____ Divine Providence Hospital _____ Muncy Valley Hospital _____ The Williamsport Hospital

Discharge Medication Instructions

 F.C. Allenwood
 P.O. Box 2500
 White Deer, PA 17887

 M. Powell, PAC
 FOC Allenwood
 2/27/12

Print Date/Time:

2/24/2012 2:48 pm

**Bureau of Prisons
Health Services
Cosign/Review**

Inmate Name: FURNARI, CHRISTOPHER
Date of Birth: 04/30/1924
Scanned Date: 02/27/2012 14:35

Sex: M

Reg #: 19815-054
Race: WHITE
Facility: ALM

Reviewed by Miller, Jay MD on 02/28/2012 12:02.

COPY

Funari, Christopher

2/24/2012 7:31:10 AM

2/24/12 1° AV block

baseline interference

ECG appear similar to 3/20/11 ECG

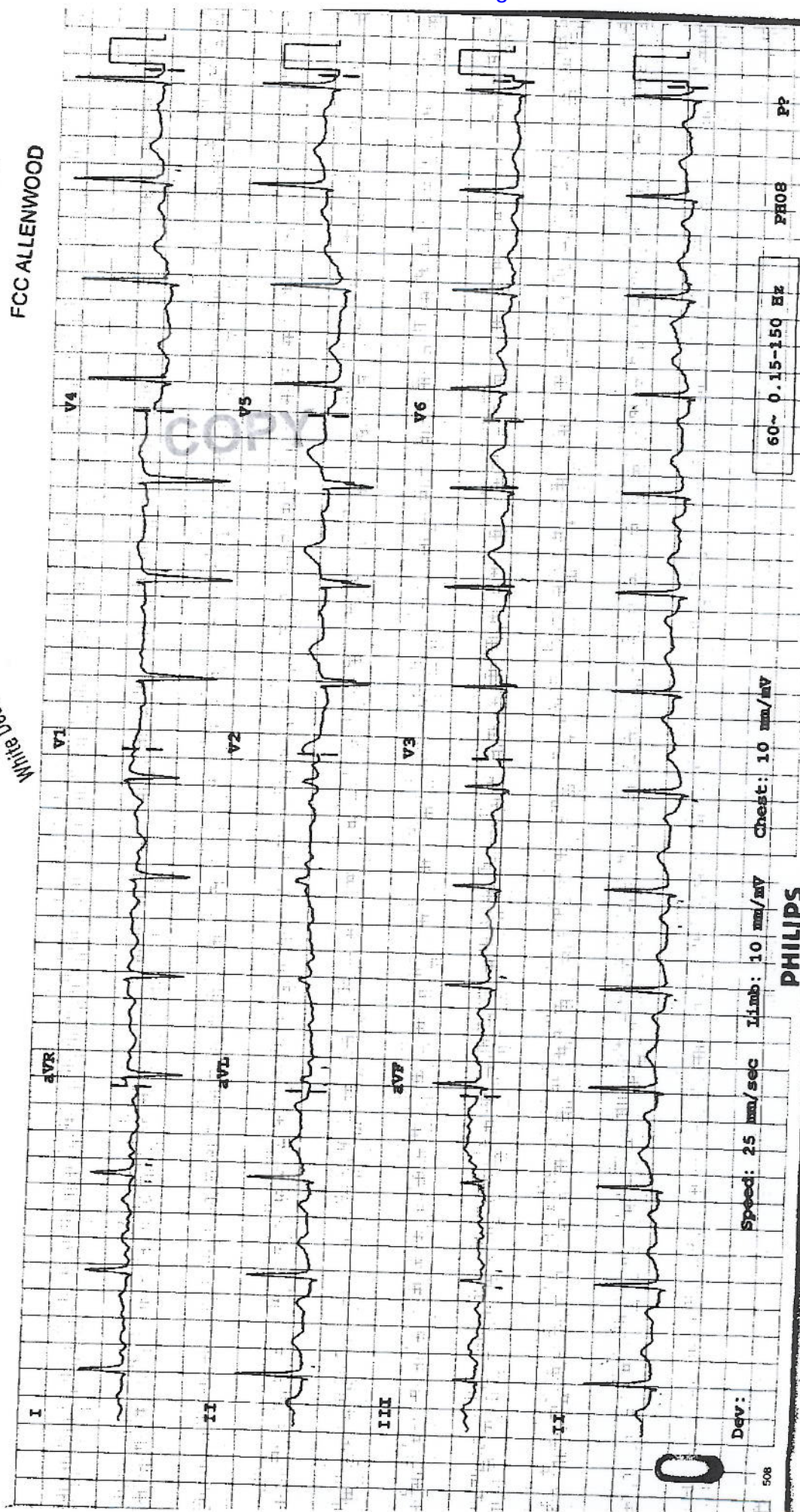
Frank J. Zedler MD
D. LEONARD, MD

FEB 24 2012

FCC ALLENWOOD

F.C.I. Allenwood
P.O. Box 2500
White Deer, PA 17887

Rate 82
PR 220
QRS 87
QT 392
QTc 458
--AXIS--
P 57
QRS 40
T 66



Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10 mm/mV

PHILIPS

60~0.15-150 Hz

PH08

PP

REORDER M3707A

G

**UNITED STATES DEPARTMENT OF JUSTICE
UNITED STATES PAROLE COMMISSION**

Christopher Furnari
Reg. No. 19815-054
FCI Allenwood
Hearing Date: October 26, 2011

NATIONAL APPEAL OF CHRISTOPHER FURNARI

Flora Edwards, Esq.
115 Broadway - Suite 1505
New York, New York 10006
212-785-3344
Attorney for Christopher Furnari

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NATIONAL APPEAL OF CHRISTOPHER FURNARI

PRELIMINARY STATEMENT

Christopher Furnari appeals from the adverse decision of the Notice of Action dated January 20, 2012 (Exhibit A). This appeal is timely filed pursuant to 28 C.F.R. §2.27(a).

PROCEDURAL HISTORY

On January 13, 1987, Christopher Furnari was sentenced by Judge Owen, sitting in the Southern District of New York to 100 years in prison, following his conviction, not as a principal, but as an aider and abettor in a bid-rigging scheme.

On December 3, 1996 Mr. Furnari had his initial parole hearing at FCI Allenwood. On January 8, 1997 a notice of action issued ordering continuation "to a 15 year reconsideration hearing (December, 2011)". Following the decision of the United States Court of Appeals for the Third Circuit, *Furnari v. Warden, Allenwood Federal Correctional Institution* 218 F.3d 250,252 (3d Cir. 2000), the Parole Commission issued a Notice of Action to reopen and schedule a *de novo* hearing. On January 2, 2001, following a *de novo* hearing, the Parole Commission issued a Notice of Action ordering continuation "to a 15 year reconsideration hearing (December, 2011)".

On April 25, 2001, the National Appeals Board affirmed its prior decision. On June 8, 2005, Furnari had an interim hearing at which new evidence was presented. On July 8,

2005, the Commission issued a Notice of Action ordering continuation "to a 15 year reconsideration hearing (December, 2011)". On September 19, 2005 Furnari appealed to the USPC National Appeals Board. On November 23, 2005 the appeal was denied. Furnari filed for a writ of habeas corpus, pursuant to 28 U.S.C. § 2241 on February 15, 2006. The Petition was denied on June 20, 2007. His appeal to the U.S. Court of Appeals for the Third Circuit was denied on July 9, 2008. *Furnari v. U.S. Parole Com'n*, 531 F.3d 241 (3d Cir. 2008).

On October 27, 2009 Furnari had an interim hearing at which new evidence regarding his deteriorating health was presented. On December 22, 2009, the Commission issued a Notice of Action ordering continuation "to a 15 year reconsideration hearing (December, 2011)".

On October 26, 2011 a 15-year Reconsideration Hearing was held at which the hearing examiner recommended parole effective January 12, 2012. A copy of the Hearing Examiner's recommendation is annexed hereto as Exhibit B. The basis for the Hearing Examiner's recommendation is set forth in his evaluation as follows:

Christopher Furnari is an 87 year old male offender appearing before the Commission for a 15-Year Reconsideration Hearing. He was a [sic capo] in the Lucchese [sic Crime] Family which was involved in murders, extortion and racketeering. It should be noted that he was convicted of Extortion, Racketeering, and Conspiracy to Commit Racketeering which involved murders that he may have known about but did not participate in. Hence the Category Eight rating of his offense. The subject has